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UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

Yvonne Frost

**20 CV 2261**

Write the full name of each plaintiff.

CV  
(Include case number if one has been assigned)

-against- MIKE PENCE

US FEDERAL GOVERNMENT

Health and Human Services

Centers for Disease Control

US CONGRESS

Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.

**COMPLAINT**

Do you want a jury trial?

Yes  No

**NOTICE**

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

## I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?

**Federal Question**

**Diversity of Citizenship**

### A. If you checked Federal Question

Which of your federal constitutional or federal statutory rights have been violated?

MEDICAL EMERGENCY/EPIDEMIC

### B. If you checked Diversity of Citizenship

#### 1. Citizenship of the parties

Of what State is each party a citizen?

The plaintiff, \_\_\_\_\_, is a citizen of the State of \_\_\_\_\_  
(Plaintiff's name)

\_\_\_\_\_  
(State in which the person resides and intends to remain.)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of \_\_\_\_\_

\_\_\_\_\_  
If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is an individual:

The defendant, \_\_\_\_\_, is a citizen of the State of \_\_\_\_\_  
(Defendant's name)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of \_\_\_\_\_

If the defendant is a corporation:

The defendant, \_\_\_\_\_, is incorporated under the laws of the State of \_\_\_\_\_

and has its principal place of business in the State of \_\_\_\_\_

or is incorporated under the laws of (foreign state) \_\_\_\_\_

and has its principal place of business in \_\_\_\_\_.

If more than one defendant is named in the complaint, attach additional pages providing information for each additional defendant.

## II. PARTIES

### A. Plaintiff Information

Provide the following information for each plaintiff named in the complaint. Attach additional pages if needed.

YVONNE

First Name

Middle Initial

Last Name

Frost

Street Address

40 Ann STREET

NY

10038

County, City

New York

State

Zip Code

Telephone Number

Email Address (if available)

Yvonne.Frost18ast.com

**B. Defendant Information**

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:

US FEDERAL GOVERNMENT  
 First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City	State	Zip Code
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Defendant 2:

CENTER FOR DISEASE CONTROL  
 First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City	State	Zip Code
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Defendant 3:

HEALTH AND HUMAN SERVICES  
 First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City	State	Zip Code
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Defendant 5: MIKE PENCE

Defendant 4:

US CONGRESS

First Name

Last Name

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

**III. STATEMENT OF CLAIM**Place(s) of occurrence: New York, New York HarborDate(s) of occurrence: Tuesday March 10<sup>th</sup>, 2020.**FACTS:**

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and what each defendant personally did or failed to do that harmed you. Attach additional pages if needed.

About one week now I have asked the God of the Universe for the origin and cure for the Coronavirus that has taken a devastating toll on the globe.

I was physically shown this circuit thing this morning. It is home-borne but China may be the Epicenter.

The almighty God in his all wisdom already tell us the cure or how it can be cured from the questions He asked me. One of the first thing He said was "You watching TV."

I was looking out at the New York Harbor (close to the Helipad) when I saw wave like circuit long thin springs or worms coming out of

## FACT 2

medical may understand the language given

Jesus said "I want you to move fast -  
these things are very poisonous and I know  
what I am saying."

Jesus continued to say "They have already taken  
got inside of you".

He said "I look in a lot.

When I looked over yesterdays vision I was told "it would be shown to me". The exact words "show it to her this time".

It's only after I toyed with the TV like image I saw riding on the train it stuck in. It was the vines and the care.

The symptoms thus far:

- ① Edge of toes sharp painful shudder
- ② weak stomach (3) Runny nose
- ④ On set of diarrhea (5) heavy eyes

In this vision I asked the question  
"What it is you want" I said to Jesus?

I heard: say Psalm 53.

This virus keeps eating, going down then re-surfacing again for more. The difference is you have to be watching it. It gets in through the eyes, nose, mouth and on lungs.

Take a look at today's AM Metro New York papers. How much money is the government willing to put out. 40 million just to help State official find a cure. I have all the Metro newspaper I have been reading. Jesus said "I can feed everyone now".

I go to the harbor to look out and pray.

PS I believe it has something to do with cellphones and theft of cellphones or information.

of the workers I was looking at it from through the grid. I said to myself what are those things?

When I looked over the ledge directly into the water I could not see it that way. I looked through the grid taking my eyes on and ~~out~~ back again and there they were.

I heard "How old is He?"

I also heard "I feel I am way too aged." When I heard that I said "What does that mean?" This virus affects everyone.

#### INJURIES:

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

Runny nose, tip of all toes sharp tudder  
eyes heavy, onset of diarrhea,  
weak stomach.

Already compromise immune system

#### IV. RELIEF

State briefly what money damages or other relief you want the court to order.

I was told "I can now feed everyone."

Please consider all the money State official and others have spoken about to bring relief and put an end to this virus.

## V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

<u>3/10/20</u>	<u>YVONNE</u>	<u>Frost</u>
Dated	First Name	Plaintiff's Signature
<u>40 ANN STREET</u>	Middle Initial	Last Name
Street Address		
<u>New York</u>	<u>NY</u>	<u>10038</u>
County, City	State	Zip Code
<u>Telephone Number</u>		<u>Yvonne.Frost1@aol.com</u>
Email Address (if available)		

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

Yes  No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.